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## APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\*

- None - *TS*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

- None - *TS*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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|   |          |         |        |           |
|---|----------|---------|--------|-----------|
| Foreign Priority claimed<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no   | STATE OR | SHEETS  | TOTAL  | INDEPENDE |
| 35 USC 119 (a-d) conditions met<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance | COUNTRY  | DRAWING | CLAIMS | CLAIMS    |
| Verified and Acknowledged<br>Examiner's Signature: <i>TS</i> Initials: _____  | CA       | 2       | 14     | 3         |

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## TITLE

Pressure relieving tie holder

|                                   |   |   |
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